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TO:

Examiner: Wilson Lee Group Art Unit: 2163

FROM:

John D. Magluyan, Reg. No. 56,867

RE:

U.S. Application No. 10/695,915 Attorney Docket No. 03581.008900.

FAX NO .:

(571) 273-8300

DATE:

February 14, 2007

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MESSAGE

Attached are the following papers for the above-identified application:

- 1. Amendment; and
- 2. Transmittal for Amendment.

Thereby certify that this correspondence is being facsimile transmitted via facsimile to the U.S. Patent and Trademark Office at (571) 273-8300, on:

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ohn D. Magluyan, Reg. No. 56,867 (Name of Attorney for Applicants)

Jehr Mayn

February 14, 2007 Date of Signature

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03581.008900.

FEB 1 4 2007

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)	
NILESH PATHAK, et al.	;	Examiner: Wilson Lee
Application No.: 10/695,915	;	Group Art Unit: 2163
Filed: October 30, 2003	;	•
For: E-MAINTENANCE SYSTEM)	February 14, 2007
Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		

AMENDMENT

Sir:

In response to the Office Action dated November 15, 2006, please amend the above-identified application, as follows:

I hereby certify that this correspondent to the U.S. Patent and Trademark Of	ce is being transmitted via facsimile fice at (571) 273-8300, on:
February 1	4, 2007
(Date of Trans	mission)
John D. Magluyan, Re	g. No. 56,867
(Name of Attorney for	
The DU Whorn	February 14, 2007
Signature	Date of Signature

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In re Application of:

Docket No.

FEB 1 4 2007

NILESH PATHAK, et al.

03581.008900.

Application No.: 10/695,915

Examiner: Wilson Lee

Filed: October 30, 2003

Group Art Unit: 2163

For: E-MAINTENANCE SYSTEM

Date: February 14, 2007

Mail Stop Amendment THE COMMISSIONER FOR PATENTS

P.O. Box 1450 Alexandria, VA 22313-1450 BEST AVAILABLE COPY

Sir:

Transmitted herewith is an Amendment in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

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	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	40	MINUS	83	= 0	x \$25 \$50	\$.00
INDEP. CLAIMS	2	MINUS	5	0	x \$100 \$200	\$.00
Fee for Multiple Dependent claims \$180°/\$360			\$.00			
			TOTAL ADDITION FOR THIS AME	ONAL FEE NDMENT		\$.00

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If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claiming small entity status is enclosed, if not filed previously.
	A check in the amount of \$ is enclosed.
	Charge \$ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
X	Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
	A check in the amount of \$ to cover the fee for a month extension is enclosed.
	A check in the amount of \$ to cover the Information Disclosure Statement fee is enclosed.
X	Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone at (714) 540-8700. All correspondence should continue to be directed to our address given below.
	Respectfully submitted,
	John D. Magluyan Attorney for Applicants Registration No.: 56,867

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200

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